	in this total and the total and the				
	n this information to identify y				
Deb	tor 1 Evelyn Marie First Name	Middle Name	Last Name		
	tor 2 se if, filing) First Name	Middle Name	Last Name		
	ed States Bankruptcy Court for t				
Orm	ed States Bankruptcy Court for the	LASTERN DISTRICT	OF MICHIGAN		
Cas (if kn	e number <u>17-42907-mar</u>			_	if this is an ded filing
	icial Form 106Sum	_	and Certain Statistical Information		12/15
Be a	s complete and accurate as po mation. Fill out all of your sch original forms, you must fill o	essible. If two married peopedules first; then complete	le are filing together, both are equally responsible for the information on this form. If you are filing amendock the box at the top of this page.	or supplyin	g correct
				Your as	ssets f what you own
1.	Schedule A/B: Property (Official 1a. Copy line 55, Total real esta	ial Form 106A/B) ate, from Schedule A/B		\$	0.00
	1b. Copy line 62, Total persona	I property, from Schedule A/E	3	\$	5,055.00
	1c. Copy line 63, Total of all pro	perty on Schedule A/B		\$	5,055.00
Part	2: Summarize Your Liabiliti	es			
					abilities t you owe
2.	Schedule D: Creditors Who Har 2a. Copy the total you listed in 0		ty (Official Form 106D) tt the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who H 3a. Copy the total claims from		ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from	Part 2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	55,617.00
			Your total liabilities	\$	55,617.00
Part	3: Summarize Your Income	and Expenses			
4.	Schedule I: Your Income (Offici Copy your combined monthly in		le I	\$	821.00
5.	Schedule J: Your Expenses (Of Copy your monthly expenses from			\$	819.00
Part	4: Answer These Questions	s for Administrative and Sta	ntistical Records		
6.	Are you filing for bankruptcy No. You have nothing to re	•	? Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you hav	e?			

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

				l l	
Debtor 1	Evelyn Marie Vau	I ghn Middle Name	Last Name		
Debtor 2	-	ACT 11 AT			
pouse, if filing)	First Name	Middle Name	Last Name		
nited States Ba	nkruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN		
ase number _	17-42907-mar				☐ Check if this is ar amended filing
	rm 106A/B				
chedul	e A/B: Prop	erty			12/15
ink it fits best. B formation. If more nswer every ques	e as complete and accura e space is needed, attach tion.	te as possible. If two marri a separate sheet to this fo	once. If an asset fits in more than of ied people are filing together, both a rm. On the top of any additional pagette You Own or Have an Interest In	re equally responsible fo	or supplying correct
Do you own or h	nave any legal or equitable	e interest in any residence,	, building, land, or similar property?		
■ No. Go to Par	t 2.				
☐ Yes. Where is	s the property?				
art 2: Describe	Your Vehicles				
you own, leas meone else driv	se, or have legal or eques. If you lease a vehic		ehicles, whether they are registed dule G: Executory Contracts and U		ny vehicles you own that
o you own, leas meone else driv Cars, vans, tru ■ No □ Yes	se, or have legal or equives. If you lease a vehicucks, tractors, sport ut	e, also report it on Schecility vehicles, motorcyc TVs and other recreation	dule G: Executory Contracts and L	Inexpired Leases. d accessories	ny vehicles you own that
o you own, least meone else driver. Cars, vans, true No Yes Watercraft, air Examples: Boar No Yes Add the dollar	se, or have legal or equives. If you lease a vehic ucks, tractors, sport ut	e, also report it on Scheolility vehicles, motorcyc TVs and other recreational watercraft, fishing veryou own for all of your e	dule G: Executory Contracts and Ules	d accessories ccessories	y vehicles you own that
you own, lease meone else driver Cars, vans, true No Yes Watercraft, ain Examples: Boar No Yes Add the dollar pages you ha	se, or have legal or equives. If you lease a vehic ucks, tractors, sport ut ucks, tractors, sport ut ucks, tractors, motor homes, A ts, trailers, motors, personal and House attached for Part 2.	e, also report it on Sched ility vehicles, motorcyc TVs and other recreational watercraft, fishing very you own for all of your elements Write that number here	entries from Part 2, including an	d accessories ccessories	\$0.00
wou own, lease meone else drive Cars, vans, true No Yes Watercraft, air Examples: Boar No Yes Add the dollar pages you have o you own or he	se, or have legal or equives. If you lease a vehice west. If you lease a vehice ucks, tractors, sport under the second of the portion in the second of the portion in the second of the	e, also report it on Scheolility vehicles, motorcyc TVs and other recreational watercraft, fishing very own for all of your elements.	entries from Part 2, including an	d accessories ccessories	
o you own, lease omeone else driver Cars, vans, true No Yes Watercraft, air Examples: Boar No Yes Add the dollar pages you have so you own or he Household go	se, or have legal or equives. If you lease a vehic ves. If you lease a vehic ves. If you lease a vehic vest. If you lease a vehic vest. If you lease a vehic vest. If you have attached for Part 2. Your Personal and Hous have any legal or equit pods and furnishings alor appliances, furniture	e, also report it on Sched ility vehicles, motorcyc TVs and other recreational watercraft, fishing very you own for all of your elements Write that number here	dule G: Executory Contracts and Lales Ies Inal vehicles, other vehicles, and essels, snowmobiles, motorcycle and entries from Part 2, including and entrie	d accessories ccessories	\$0.00 Current value of the portion you own? Do not deduct secured

including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Schedule A/B: Property Official Form 106A/B

De	ebtor 1	Evelyn Marie	Vaughn	Case number (if known)	17-42907-mar
			Video Recorder, Dvd Recorder		\$150.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or othe ons, memorabilia, collectibles	r art objects; stamp, coin,	or baseball card collections;
			Paint on tile picture, Dvd Tapes		\$200.00
9.	Example No	ent for sports and es: Sports, photogonal musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes a	and kayaks; carpentry tools;
10.	■ No		, shotguns, ammunition, and related equipment		
11.	Clothes Examp	3	othes, furs, leather coats, designer wear, shoes, accessories		
			Clothing		\$1,500.00
12.	□ No		velry, costume jewelry, engagement rings, wedding rings, heirloom j	ewelry, watches, gems, g	old, silver
			Jewelry		\$200.00
	Examp ■ No □ Yes. Any oth ■ No	rm animals les: Dogs, cats, b Describe ner personal and Give specific info	d household items you did not already list, including any health	aids you did not list	
15			of all of your entries from Part 3, including any entries for pages number here	s you have attached	\$5,050.00
		scribe Your Finand In or have any le	cial Assets egal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		nave in your wallet, in your home, in a safe deposit box, and on hand	d when you file your petition	on

D	ebtor 1	Evelyn Mar	rie Vaugh	n		Case number (if known) 1	7-42907-mar
17						; certificates of deposit; shares in credit unions, brokerage hou the same institution, list each.	ses, and other similar
						Institution name:	
				Checking &			
			17.1.		ınts	Genisys Credit Union	\$5.00
18	Exam _l ■ No	ples: Bond fund				ge firms, money market accounts	
	⊔ Yes.			Institution or issue	r name		
19	joint v ■ No	venture	nformation	interests in incorparts in inc		ed and unincorporated businesses, including an interest in % of ownership:	an LLC, partnership, and
20	Gover	nment and cor	norate hoi	nds and other nec	otiabl	e and non-negotiable instruments	
20	Negot Non-n ■ No	iable instrumen	ts include purpose to the transfer of the tran	personal checks, ca those you cannot to	ashiers	to someone by signing or delivering them.	
21	Exam _i	ment or pension ples: Interests in			403(b), thrift savings accounts, or other pension or profit-sharing plan	ns
	■ No □ Yes.	List each accou		ely. of account:		Institution name:	
22	Your s		sed deposit	s you have made s		you may continue service or use from a company c utilities (electric, gas, water), telecommunications companies	, or others
						Institution name or individual:	
23		ties (A contract	for a perio	dic payment of mor	ney to	you, either for life or for a number of years)	
	■ No □ Yes.		lssuer nam	e and description.			
24		ts in an educa C. §§ 530(b)(1)			qualifi	ied ABLE program, or under a qualified state tuition progra	am.
	☐ Yes.		Institution r	name and description	on. Se	parately file the records of any interests.11 U.S.C. § 521(c):	
25	■ No	, equitable or f		, ,	other	than anything listed in line 1), and rights or powers exerci	sable for your benefit
26	Patent	s, copyrights,	trademark	s, trade secrets, a		her intellectual property om royalties and licensing agreements	
	☐ Yes.	Give specific in	nformation	about them			
27				r general intangib lusive licenses, cod		ve association holdings, liquor licenses, professional licenses	
	_	Give specific in	nformation	about them			
M	oney or	property owed	l to you?				Current value of the portion you own?

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement. No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, So benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Sur valu 22. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prope someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	
Yes. Give specific information about them, including whether you already filed the returns and the tax years Pamily support	
Yes. Give specific information about them, including whether you already filed the returns and the tax years Pamily support	
Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Sur value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prope someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	
30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Someone benefits; unpaid loans you made to someone else No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Sur value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prope someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	ocial Security
Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Sobenefits; unpaid loans you made to someone else No Yes. Give specific information 1. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Sur valt 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prope someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	ocial Security
 Yes. Give specific information 31. Interests in insurance policies	
Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Sur valt 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prope someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	
Company name: Beneficiary: Sur valu 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prope someone has died. No Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	
If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive prope someone has died. ■ No □ Yes. Give specific information 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim	rrender or refund ue:
 Yes. Give specific information Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claim. 	erty because
Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No □ Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims.	
Yes. Describe each claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off cl	
■ No	laims
☐ Yes. Describe each claim	
35. Any financial assets you did not already list ■ No	
☐ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$5.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6.	
□ Yes. Go to line 38.	
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.	
Yes. Go to line 47.	

Deb	tor 1	Evelyn Marie Vaughn		Case number (if known)	17-42907-mar
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
		have other property of any kind you did not already list? les: Season tickets, country club membership			
	No				
	Yes. 0	Give specific information			
54.	Add tl	he dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	: Total vehicles, line 5	\$0.00		
57.	Part 3	: Total personal and household items, line 15	\$5,050.00		
58.	Part 4	: Total financial assets, line 36	\$5.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	': Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$5,055.00	Copy personal property to	otal \$5,055.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$5.055.00

Fill in this information to identify your case:							
Debtor 1	Evelyn Marie Vau	ghn					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	FMICHIGAN				
Case number 1	17-42907-mar						
(if known)					☐ Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	Household Goods & Furnishings Line from Schedule A/B: 6.1	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)				
	Line Holli Schedule PAB. 0.1			100% of fair market value, up to any applicable statutory limit					
	Video Recorder, Dvd Recorder Line from Schedule A/B: 7.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)				
	Line from Generalic PAB. TT			100% of fair market value, up to any applicable statutory limit					
	Paint on tile picture, Dvd Tapes Line from Schedule A/B: 8.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)				
	Line Holli Schedule PAB. 0.1			100% of fair market value, up to any applicable statutory limit					
	Clothing Line from Schedule A/B: 11.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)				
	Line IIIII Schedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit					
	Jewelry Line from Schedule A/B: 12.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(4)				
	LINE HOLL SCHEUUIE PVD. 12.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	e Amount of the exemption you claim Specific laws the		Specific laws that allow exemption	
			Copy the value from Schedule A/B	Check only one box for each exemption.			
	Checking & savings accounts: Genisys Credit Union Line from Schedule A/B: 17.1		\$5.00		\$5.00	11 U.S.C. § 522(d)(5)	
			100% of fair market value, up to any applicable statutory limit		· •		
3.	3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)						
■ No□ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?							
							□ No
☐ Yes							

Fill in this inform					
Debtor 1	Evelyn Marie Vau	ıghn]
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	OF MICHIGAN		
Case number	17-42907-mar				
(if known)					☐ Check if this is an
					amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Fill in	this inform	ation to identify your ca	se:				
Debtor	r 1	Evelyn Marie Vaugh	n				
		First Name	Middle Name	Last Name			
Debtor (Spouse		First Name	Middle Name	Last Name			
United	States Ban	kruptcy Court for the:	EASTERN DISTRIC	CT OF MICHIGAN			
Case r	number 17	7-42907-mar					
(if known							Check if this is an
							amended filing
Offici	ial Form	106E/F					
		<u></u>	o Havo Une	ocured Claims			12/15
					Part 2 for creditors with NON	DDIODITY o	
Schedul left. Atta name ar	le D: Creditor ach the Conti nd case num	rs Who Have Claims Secure inuation Page to this page. ber (if known).	ed by Property. If mo If you have no inforr	re space is needed, copy	any creditors with partially s the Part you need, fill it out, i do not file that Part. On the to	number the	entries in the boxes on the
Part 1:		of Your PRIORITY Unse					
_	-	s have priority unsecured o	laims against you?				
	No. Go to Pa	rt 2.					
	Yes.	() NONDOLODITY					
Part 2:		of Your NONPRIORITY					
_	-	s have nonpriority unsecur	• •				
Ц	No. You have	e nothing to report in this part	. Submit this form to the	ne court with your other sche	edules.		
	Yes.						
uns	secured claim in one creditor	, list the creditor separately for	or each claim. For eac	h claim listed, identify what t	b holds each claim. If a credit ype of claim it is. Do not list cla three nonpriority unsecured cl	ims already	included in Part 1. If more
							Total claim
4.1		ners Energy*	Last 4 d	digits of account number	7630		\$300.00
		Creditor's Name tcy Department	Whon w	vas the debt incurred?	2013		
		olidge Highway Rd.	Wileit	vas tile debt illedired:	2013		
	Lansing,	MI 48937-0001					
		eet City State Zlp Code	As of th	e date you file, the claim i	s: Check all that apply		
	_	red the debt? Check one.					
	Debtor 1	•	☐ Con	=			
	Debtor 2	•		quidated			
	_	and Debtor 2 only	☐ Disp	uted NONPRIORITY unsecured	d claim:		
	_	one of the debtors and anoth	г, г. Па	lent loans	i Ciaiiii.		
	☐ Check indebt	f this claim is for a commu	ility		ration agreement or divorce th	at vou did no	ot .
	Is the claim	subject to offset?		s priority claims	ag. soon or arrondo tri	, ou ala lie	-
	■ No		☐ Deb	ts to pension or profit-sharin	g plans, and other similar debt	s	
	☐ Yes		Othe	er. Specify Utility Serv	ice		

r 1 Evelyn Marie Vaughn		Case number (if know) 17-42907-mar	
*DTE Energy	Last 4 digits of account number	0039	\$506.00
Nonpriority Creditor's Name One Energy Plaza, 688 WCB Attn: Legal Dept Detroit, MI 48226	When was the debt incurred?	2013	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Utility Serv	ice	
Advance America	Last 4 digits of account number	6351	\$553.00
Nonpriority Creditor's Name 19200 Fort St.	When was the debt incurred?	2010	
Riverview, MI 48192 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Cash Adva	nce	
American Anesthesicology	Last 4 digits of account number	5683	\$61.00
Nonpriority Creditor's Name PO BOX 88087 Chicago, IL 60680	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Medical		

Debto	or 1 Evelyn Marie Vaughn		Case number (if know) 17-42907-ma	ar
4.5	ASC TCG LLC	Last 4 digits of account number	2322	\$101.00
	Nonpriority Creditor's Name 37399 Garfield Suite 100	When was the debt incurred?	2017	
	Clinton Township, MI 48036 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection		
4.6	Carm	Last 4 digits of account number	5996	\$377.00
	Nonpriority Creditor's Name 801 Sunnyside Drive, P.O. Box 358 Cadillac, MI 49601	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	Пол		
		Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	1 claim:	
	At least one of the debtors and another	☐ Student loans	. J.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	g plans, and other similar debts	
	☐ Yes	Other Specify Medical bil		
4.7	Cash Advance	Last 4 digits of account number	7630	\$600.00
	Nonpriority Creditor's Name 2533 N. Carson Street 4976	When was the debt incurred?	2001	,
	Carson City, NV 89706 Number Street City State Zlp Code	As of the data you file the claim	e. Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	5. Спеск ан тат арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Pay day loa	•	
	□ 103	Other. Specify		

Cash In Payday Advance	Last 4 digits of account number 14SC	\$209.0
Nonpriority Creditor's Name 36529 Gratiot Ave	When was the debt incurred? 2005	
Clinton Township, MI 48035	<u></u>	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all t	hat apply
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreen report as priority claims	
No	Debts to pension or profit-sharing plans, and	other similar debts
Yes	Other. Specify Payday loan	
Cashnet USA	Last 4 digits of account number 3714	\$173.0
Nonpriority Creditor's Name P.O. Box 06230	When was the debt incurred? 2016	
Chicago, IL 60606 Number Street City State Zlp Code	As of the date you file, the claim is: Check all t	hat apply
Who incurred the debt? Check one.	•	,
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreen report as priority claims	nent or divorce that you did not
No	☐ Debts to pension or profit-sharing plans, and	nther similar dehts
□ Yes	■ Other. Specify Payday Loan	one, similar depts
Charter One Nonpriority Creditor's Name	Last 4 digits of account number 4156	\$1,179.0
P.O. Box 42006 Providence, RI 02940-2006	When was the debt incurred? 2006	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all t	hat apply
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreen report as priority claims	nent or divorce that you did not
No	☐ Debts to pension or profit-sharing plans, and	other similar debts
110		

1 Evelyn Marie Vaughn		. , ,			
Chase Bank	Last 4 digits of account number	6170	\$300		
Nonpriority Creditor's Name P.O. Box 29735	When was the debt incurred?	2008	<u> </u>		
New York, NY 10087 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	,				
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No	Debts to pension or profit-sharing				
Yes	Other. Specify Insufficient	Funds			
Check Into Go	Last 4 digits of account number	7630	\$600		
Nonpriority Creditor's Name 19374 Kelly Road	When was the debt incurred?	2001	•		
Harper Woods, MI 48225 Number Street City State Zlp Code	As of the date you file the claim	is: Chook all that apply			
Who incurred the debt? Check one.	As of the date you file, the claim	s. Спеск ан that арру			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Pay day loa	<u>ın</u>			
Check N Go	Last 4 digits of account number	7630	\$672		
Nonpriority Creditor's Name			<u> </u>		
14844 W. 7 Mile Rd	When was the debt incurred?	2015			
Oak Park, MI 48237 Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.	• •				
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	□ Debts to pension or profit-sharir	g plans, and other similar debts			
■ No □ Yes	Other. Specify Pay day load				

Clairridge Estates	Last 4 digits of account number	91LT	\$755.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ100.00
36780 Harper Avenue Clinton Township, MI 48035	When was the debt incurred?	1997	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Landlord to	enant	
Comcast Cable	Last 4 digits of account number	7630	\$400.00
Nonpriority Creditor's Name P.O. Box 3006	When was the debt incurred?	2012	
Southeastern, MI 19398-3006	when was the dept incurred:	2012	
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Vho incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community lebt	☐ Student loans		
s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Cable		
		7190,9118,4	
		808,9589,35	
Comenity Bank	Last 4 digits of account number		\$3,041.00
Nonpriority Creditor's Name P.O. Box 182789 Columbus, OH 43218	When was the debt incurred?	2014	
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Various Ac	counts	

Onnamed analysis Association to		0000	\$46
Comprehensive Anesthesia Nonpriority Creditor's Name	Last 4 digits of account number	9898	\$16
P.O. Box 1213	When was the debt incurred?	2017	
Birmingham, MI 48012 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	7.0 0. 11.0 uuto youo, 11.0 o.u	or onotical diatappy	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Medical		
Core Comm Internet Service	Last 4 digits of account number	9656	\$39
Nonpriority Creditor's Name	_		***
PO BOX 712959 Cincinnati, OH 45271	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other. Specify Collection		
	. ,		
Crest Financial	Last 4 digits of account number		\$900
Nonpriority Creditor's Name 61 West 13490 Draper, UT 84020	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	■ Other. Specify Miscellane		

		7000	\$45.00
Family Eye Care Associates Nonpriority Creditor's Name	Last 4 digits of account number	7630	\$15.00
21701 Kelly road Eastpointe, MI 48021	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Eye Doctor		
Fifth Third Bank	Last 4 digits of account number	6692	\$1,233.00
Nonpriority Creditor's Name			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
38 Fontain Square Plaza Mail Droop 1com65 Cincinnati, OH 45263	When was the debt incurred?	2010	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐Yes	Other. Specify Collection		
Finger Hut/Axsys National Bank	Last 4 digits of account number	xx30	\$286.00
20401 N 29th Phoenix, AZ 85027-3149	When was the debt incurred?	2000	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt s the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
a the claim audject to onset?	report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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Frontline Asset Strategies	Last 4 digits of account number	1575	\$506.00
Nonpriority Creditor's Name 1935 W. County Rd. B2 #425	When was the debt incurred? 2010		
Saint Paul, MN 55113-2797 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Collection		
		7TLT,900T,1	
Joseph Ventiniglia	Last 4 digits of account number	007	\$5,130.00
Nonpriority Creditor's Name 51344 Nicolette Dr. New Baltimore, MI 48047	When was the debt incurred?	2012	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Various Lan	ndlord Tenant Judgments	
Kay Jewelers	Last 4 digits of account number	0359	\$396.00
Nonpriority Creditor's Name 35000 E-1A W. Warren Rd. Westland. MI 48185	When was the debt incurred?	2014	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	•	,	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Jewelry		

IZ.II. T		01100	A. 227 -		
Kelly Travis Nonpriority Creditor's Name	Last 4 digits of account number	9HSC	\$1,085.0		
42721 Greystone Dr. Sterling Heights, MI 48313	When was the debt incurred?	2015			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community ☐ Student loans					
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing				
Yes	Other. Specify Garnishme	nt			
Koala D LLC	Last 4 digits of account number	1HLT,5HLT	\$13,758.0		
Nonpriority Creditor's Name					
PO BOX 480485	When was the debt incurred?	2016			
New Haven, MI 48048 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.		or oncor an mar apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Various La	ndlord Tenant Judgments			
Koala D, LLC	Last 4 digits of account number	4TLT,794H	\$6,035.0		
Nonpriority Creditor's Name		0045			
c/o Jonathan B. Eadie 44311 Reynolds Dr. Clinton Township, MI 48036	When was the debt incurred?	2015			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
who incurred the dept? Check one.					
Debtor 1 only	☐ Contingent				
_	☐ Contingent☐ Unliquidated				
■ Debtor 1 only	· ·				
■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:			
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans				
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separation	d claim: aration agreement or divorce that you did not			
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	aration agreement or divorce that you did not			

Schedule E/F: Creditors Who Have Unsecured Claims

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Kohls Department	Last 4 digits of account number	9512	\$361.00
Nonpriority Creditor's Name	-		· ·
P.O. Box 2983 Milwaukee, WI 53201	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Consumer	Goods	
Lakeshore Eye Surgery Center	Last 4 digits of account number	7542	\$377.00
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ011100
NEED ADDRESS	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other. Specify Eye Exam		
Macys Payment Center	Last 4 digits of account number	7630	\$1,600.00
Nonpriority Creditor's Name	_		
P.O. Box 183083 Columbus, OH 43218	When was the debt incurred?	2000	
Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	on plans, and other similar debts	
— INO	Other. Specify Clothing, N	= 1	

McLaren Hospital	Last 4 digits of account number	7630	\$378.0
Nonpriority Creditor's Name	-		• • • • • •
PO Box 77000 Detroit. MI 48227	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Doctor Bill		
McLaren Macomb	Last 4 digits of account number	0001	\$192.0
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ.0 <u>2.</u> 0
5406 Gateway Center Dr. Flint, MI 48507	When was the debt incurred?	2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	o plans, and other similar debts	
■ No □ Yes	Other. Specify Various Ac		
□ Yes	Other. Specify Various AC	Counts	
Metropolitan Eye Center	Last 4 digits of account number	7542	\$394.0
Nonpriority Creditor's Name	When was the debt incurred?	2016	
NEED ADDRESS			
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt s the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	o plans, and other similar debts	
■ No □ Yes	Other. Specify Eye Exam	g preside data. Similar dobto	

Minima de Cita		041.7	A4
Michele Grillo Nonpriority Creditor's Name	Last 4 digits of account number	34LT	\$1,234.00
dba Rivercrest Arms Apartments c/o Charles M Tower 37211 Harper Ste 2a Clinton Township, MI 48036	When was the debt incurred?	2001	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Landlord T	enant	
Michigan Schools & Government Credit	Last 4 digits of account number	4850	\$599.00
Nonpriority Creditor's Name 40400 Garfield Rd Clinton Township, MI 48038	When was the debt incurred?	2012	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Bank Acco	unt	
Montgomery Ward		6290	\$228.00
Nonpriority Creditor's Name	Last 4 digits of account number		φ220.U
P.O. Box 2843 Monroe, WI 53566-6843	When was the debt incurred?	2015	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Misc.		

Schedule E/F: Creditors Who Have Unsecured Claims

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or 1 Evelyn Marie Vaughn		Case number (if know)	17-42907-mar		
Newberry Woods	Last 4 digits of account number	Various Accounts	\$4,130.00		
Nonpriority Creditor's Name 6960 Orchard Lake Rd Suite 206 West Bloomfield, MI 48322	When was the debt incurred?	2003			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only □ Debtor 2 only	☐ Contingent				
	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d alaim.			
At least one of the debtors and another		u Ciaim:			
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not		
No	Debts to pension or profit-sharin	ag plane, and other similar de	hto		
■ No	·				
Yes	■ Other. Specify CT04-0727	LT, CT03-5787LT, CT0 LT, CT04-2427LT	03-6864LT, 		
Orchard	Last 4 digits of account number	6059	\$160.00		
Nonpriority Creditor's Name c/o Cavalry Portfolio Services PO BOX 9 Hawthorne, NY 10532	When was the debt incurred?	2003			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
■ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not		
■ No	Debts to pension or profit-sharing	ng plans, and other similar de	ebts		
Yes	Other. Specify Collection				
Pioneer Financial LLC	Last 4 digits of account number	7996	\$1,605.00		
Nonpriority Creditor's Name 7091 Orchard Lake Ste. 270	When was the debt incurred?	2016			
West Bloomfield, MI 48322 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim				
■ Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	□ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
Check if this claim is for a community	☐ Student loans				
debt	Obligations arising out of a sepa	that you did not			
Is the claim subject to offset?	report as priority claims	· ·	•		
No	Debts to pension or profit-sharing	ng plans, and other similar de	bts		
☐ Yes	Other. Specify Misc.				

Schedule E/F: Creditors Who Have Unsecured Claims

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		00LT	A4 = 00 0
Rivercrest Arms Apartments Nonpriority Creditor's Name	Last 4 digits of account number	86LT	\$1,760.00
23560 Denton St. Clinton Township, MI 48036	When was the debt incurred?	2000	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Landlord T	enant	
Robert Kluck Broker	Last 4 digits of account number	7630	\$2,035.00
Nonpriority Creditor's Name	_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
21231 Cass Ave Clinton Township, MI 48036	When was the debt incurred?	2015	
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	tration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Profession:		
Shop Now Pay Plan	Last 4 digits of account number	4997	\$92.00
Nonpriority Creditor's Name PO Box 2852	When was the debt incurred?	2016	
Monroe, WI 53566-8052	_		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	По и		
_	☐ Contingent		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed		
☐ Deptor 1 and Deptor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Other. Specify Misc.		

Schedule E/F: Creditors Who Have Unsecured Claims

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.4				
. 4	Stoneberry	Last 4 digits of account number	75C2	\$303.00
	Nonpriority Creditor's Name P.O.Box 2820	When was the debt incurred?	2015	
	Monroe, WI 53566 Number Street City State Zlp Code	As of the date you file, the claim i	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Offeck all triat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Misc. Purch	nases	
			3326,5123,6	
.4	Why Not Lease It LLC/Tempoe LLC	Last 4 digits of account number	112	\$329.00
	Nonpriority Creditor's Name 1750 Elm St. #1200 Manchester, NH 03104	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Leased Pro	perty	
.4			7000	
;	WOW Cable Nonpriority Creditor's Name	Last 4 digits of account number	7630	\$600.00
	P.O. Box 5715	When was the debt incurred?	2013	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	• •		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Cable		

Debtor	1 Evelyn Marie Vaughn		Case number (if know)	17-42907-mar
4.4	Wright & Filippis	Last 4 digits of account number	4021	\$14.00
	Nonpriority Creditor's Name 1206 Reliable Pkwy. Chicago, IL 60686	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	paration agreement or divorce	that you did not
	■ No	Debts to pension or profit-shari	ing plans, and other similar de	ebts
	Yes	Other. Specify Medical St	upplies	
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed		
is tryi have	nis page only if you have others to be notified ing to collect from you for a debt you owe to s more than one creditor for any of the debts th ed for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i nat you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the	collection agency here. Similarly, if you
	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	e of Michigan		Part 1: Creditors with Prior	•
	of Treasury/Bankruptcy Unit Box 30168		Part 2: Creditors with Nonp	oriority Unsecured Claims
	ng, MI 48909			
		Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	I Party Withholding Unit	Line 4.27 of (<i>Check one</i>):	Part 1: Creditors with Prior	ity Unsecured Claims
	gan Department of Treasury		Part 2: Creditors with None	oriority Unsecured Claims
_	ng, MI 48909			
		Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	District Court	Line 4.26 of (<i>Check one</i>):	Part 1: Creditors with Prior	ity Unsecured Claims
	8789H-SC Starks Drive	·	Part 2: Creditors with None	oriority Unsecured Claims
	on Township, MI 48036			
	μ,	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	District Court		☐ Part 1: Creditors with Prior	ity Unsecured Claims
	2900T,10076T & 13-05747TLT Starks Drive	ı	Part 2: Creditors with None	oriority Unsecured Claims
	on Township, MI 48036			
•	p,	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	
	District Court		Part 1: Creditors with Prior	ity Unsecured Claims
	Van Dyke		Part 2: Creditors with Nong	oriority Unsecured Claims
	991HLT, 16-01025HLT MI 48316			
Otica,	WII 40310	Last 4 digits of account number		
Nama -	and Address	On which ontry in Bort 1 or Bort 2 eli-li-	u liet the original are diter?	
	nd Address District Court	On which entry in Part 1 or Part 2 did yo Line 4.8 of (<i>Check one</i>):	u list the original creditor? Part 1: Creditors with Prior	rity Unsecured Claims
#05-69	914-SC		Part 2: Creditors with Nong	
	Romeo Plank		. 3.12. 0.0311010 Will 14011	y shoosalda diamio
Clinto	on Township, MI 48038	Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did yo	u list the original creditor?	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Evelyn Marie Vaughn		Case number (if know)	17-42907-mar				
41B District Court #CT-97-4491-LT 40700 Romeo Plank Clinton Township, MI 48038	Line 4.14 of (Check one): Last 4 digits of account number	■ Part 2: Creditors with Nonpriority Unsecured Claims					
Name and Address 41B District Court #CT-01-0234-LT 40700 Romeo Plank Clinton Township, MI 48038	On which entry in Part 1 or Part 2 did y Line 4.35 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priori Part 2: Creditors with Nonp	-				
Name and Address 41B District Court #CT-00-1386-LT 40700 Romeo Plank Clinton Township, MI 48038	On which entry in Part 1 or Part 2 did y Line 4.41 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priori Part 2: Creditors with Nonp					
Name and Address 41B District Court CT04-2427,0727 CT03-2505,5787,6864 22308 Starks Dr Clinton Township, MI 48036	On which entry in Part 1 or Part 2 did y Line 4.38 of (Check one): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp					
Name and Address 41B District Court #15-09794-H,15-00524T-LT 22308 Starks Dr Clinton Township, MI 48036	On which entry in Part 1 or Part 2 did y Line 4.28 of (Check one): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp					
Name and Address Allied Interstate PO Box 361474 Columbus, OH 43236-1474	On which entry in Part 1 or Part 2 did y Line 4.3 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp					
Name and Address Arrow 120 Financial Services Norfolk, VA 23502	On which entry in Part 1 or Part 2 did y Line 4.10 of (Check one): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp					
Name and Address Gardner White 90 Christiana Drive New Castle, DE 19720	On which entry in Part 1 or Part 2 did y Line 4.19 of (Check one): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp					
Name and Address Island National Group P.O. Box 18009 Hauppauge, NY 11788-8809	On which entry in Part 1 or Part 2 did y Line 4.22 of (Check one): Last 4 digits of account number	you list the original creditor? ☐ Part 1: Creditors with Priori ☐ Part 2: Creditors with Nonp	•				
Name and Address Law office of Jonathan B Eadie PO BOX 36214 Grosse Pointe, MI 48236	On which entry in Part 1 or Part 2 did y Line 4.27 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priori Part 2: Creditors with Nonp					
Name and Address Nationwide Credit Inc. P.O. Box 740640 Atlanta, GA 30374-0640	On which entry in Part 1 or Part 2 did y Line 4.21 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priori Part 2: Creditors with Nonp					

Schedule E/F: Creditors Who Have Unsecured Claims

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Everyn Marie Vaugnin		Case Humber (If know)	17-42907-mar			
Name and Address Neil A. Chaness	On which entry in Part 1 or Part 2 Line 4.38 of (Check one):	2 did you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims				
32841 Middlebelt Rd Ste 400 Farmington, MI 48334		■ Part 2: Creditors with Nonp				
. ug.c.ii, iiii 40004	Last 4 digits of account number					
Name and Address Professional Leasing & Sales	On which entry in Part 1 or Part : Line 4.42 of (Check one):	2 did you list the original creditor? □ Part 1: Creditors with Prior	ity Unsecured Claims			
38790 Santa Barbara St. Clinton Township, MI 48036		Part 2: Creditors with Non	priority Unsecured Claims			
	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	55,617.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	55,617.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Evelyn Marie Vau	ghn		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F MICHIGAN	
Case number	17-42907-mar			
(if known)	17 42307 mai			Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	erson or	Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5)		0.0.0		
	Name				_
	Number	Street			_
	City		State	ZIP Code	

Fill in this	information to identify your	case:			
Debtor 1	Evelyn Marie Vau	ghn			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT	OF MICHIGAN		
Case num	17-42907-mar			☐ Check if this is an amended filing	
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors		12/15	
people are fill it out, a your name	e filing together, both are equ	ally responsible for sup boxes on the left. Attac . Answer every questio	oplying correct information that the Additional Page to n.	complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page this page. On the top of any Additional Pages, write	} ,
1. 50	you have any codebiors? (II	you are illing a joint case	, do not list either spouse a	as a codebior.	
■ No □ Yes	s				
Arizor	thin the last 8 years, have you ha, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spor	Nevada, New Mexico, F	uerto Rico, Texas, Washir	? (Community property states and territories include ngton, and Wisconsin.)	
in line Form out C	e 2 again as a codebtor only i	f that person is a guara	ntor or cosigner. Make s	if your spouse is filing with you. List the person show ure you have listed the creditor on Schedule D (Offici G). Use Schedule D, Schedule E/F, or Schedule G to Column 2: The creditor to whom you owe the debt	ial fill
	Name, Number, Street, City, State and Z	P Code		Check all schedules that apply:	
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	
-	Number Street City	State	ZIP Code	-	
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line	_
=	Number Street City	State	ZIP Code	-	

Debtor 1	Fill	in this information to identify your c	ase.							
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN Case number 17-42907-mar		, ,								
Case number (If known) T7-42907-mar						_				
Official Form 106I Schedule I: Your Income 12/13 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for sputplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question information. If you have more than one job, attach a separate page with information about additional employers. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. +\$ 0.00	Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF MICHIGAN		_				
Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information and your spouse is not filling with you, do not include information and your spouse is not filling with you, do not include information and your spouse is not filling with you, do not include information and your spouse is not filling with you, do not include information and your spouse is not filling with you, do not include information and case number (if known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A \$ N/A \$ 0.00 \$ N/A \$ 0.00 \$ N/A \$ N/A \$				_			Check if this is:			
Official Form 106l Schedule I: Your Income 12/13 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, include information about your spouse. If you have ment than one job, attach a separate page with information about additional employers. Include part-time, seasonal, or self-employed work. Occupation Employer's address Occupation Employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A	(lf kr	nown)						Ū		
Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate dard your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Employer's name Employer's address How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. List monthly gross wages, salary, and commissions (before all payroll 3. +\$ 0.00 \$ N/A	_									chapter
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Park 1: Describe Employment 1. Fill in you employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll 2. \$ 0.00 \$ N/A	\overline{O}	fficial Form 106I					MM / DD/ Y	YYY		
supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question Part 1:	S	chedule I: Your Inc	ome							12/15
information. If you have more than one job, attach a separate page with information about additional employers. Occupation Employer's name Employer's name Employer's address How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated. If you or your non-filling spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A N/A	sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your sith you, do not inclu	spouse i de infori	s livin natior	g with you, incl about your spo	ude inform ouse. If mo	nation about re space is i	your needed,
attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 *\$ N/A	1.			Debtor 1			Debtor 2	2 or non-fil	ing spouse	
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 * N/A			Fundament status	☐ Employed			☐ Empl	oyed		
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		, , ,	Employment status	■ Not employed			☐ Not e	☐ Not employed		
Self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Fart 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filling spouse 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A		employers.	Occupation							
How long employed there? Part 2: Give Details About Monthly Income			Employer's name							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Employer's address							
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If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse	Par	t 2: Give Details About Mor	nthly Income							
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. List monthly gross wages, salary, and commissions (before all payroll sequence of the company of the c	spou	use unless you are separated.		-					-	
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A	•				ii ioi aii e	прю	ers for that perso	on on the iii	ies below. II y	you need
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$						F	For Debtor 1			
	2.				2.	\$_	0.00	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$ \$ \$ N/A	3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	N/A	
	4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	0.00	\$	N/A	

Debt	or i	Evelyn Marie Vaugnn		Case	number (if known)	17-42907-1	nar	
				For	Debtor 1	For Debtor		
	Copy	/ line 4 here	4.	\$	0.00	\$	N/A	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	<u> </u>	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
9.	8a. 8b. 8c. 8d. 8e. 8f.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	8a. 8b. 8c. 8d. 8e. 8f. 8g. 8h.+	\$ \$ \$	0.00 0.00 0.00 0.00 821.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ + \$	N/A N/A N/A N/A N/A N/A	
.	, tuu		· [<u> </u>	021.00		1	
10.		•	10. \$		821.00 + \$_	N/A	= \$	821.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your officends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a sify:	depend			ed in <i>Schedul</i>	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain es					\$Combine	821.00
13.	Do y	ou expect an increase or decrease within the year after you file this form?	•				monthly	
		No.						
		Yes. Explain:						

Fill	in this informa	tion to identify yo	our case:						
Deb	tor 1	Evelyn Marie	Vaughn			Check	if this is:		
						_	n amended filing		
	otor 2 ouse, if filing)							ving postpetition chapter the following date:	
(Spt	ouse, ii iiiiig)					'	s expenses as on	the following date.	
Unit	ed States Bankr	ruptcy Court for the	: EASTE	RN DISTRICT OF MICHIG	AN	N	IM / DD / YYYY		
	e number 17	7-42907-mar							
O	fficial Fo	rm 106J							
S	chedule	J: Your	Exper	ises				12/1	15
Be info nur	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta y question	If two married people arch another sheet to this					_
Par 1.	t 1: Descr Is this a join	ibe Your House	hold						—
١.									
	■ No. Go to			ata hawa ah ahdo					
		s Debtor 2 live i	in a separ	ate nousenoid?					
		-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	r 2.		
2.	Do you have	e dependents?	■ No						
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.						☐ Yes	
								□ No	
								☐ Yes	
								□ No	
								☐ Yes	
								□ No	
3.	Do your exp	enses include	_					☐ Yes	
0.	expenses of	f people other to d your depende	han 👝	No Yes					
		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp					
the	value of such	h assistance an		government assistance it	•		Vaur avna		
(Of	ficial Form 10	l61.)					Your expe	511363	
4.		or home owners		ses for your residence. In	nclude first mortgage	e 4. \$		450.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. \$		0.00	
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00	
				ıpkeep expenses		4c. \$		0.00	
_		owner's associat				4d. \$		0.00	
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00	

Official Form 106J Schedule J: Your Expenses 17-42907-mar Doc 10 Filed 03/16/17 Entered 03/16/17 09:04:48 Page 34 of 43

Deb	tor 1	Evelyn I	larie Vaughn		Case num	ber (if known)	17-42907-mar
6.	Utiliti	ies:					
	6a.	Electricity	heat, natural gas		6a.	\$	0.00
	6b.		wer, garbage collection		6b.	\$	0.00
	6c.	•	e, cell phone, Internet, satellite, and cable se	ervices	6c.	\$	45.00
	6d.	Other. Sp			6d.	\$	0.00
7.			ekeeping supplies		7.	\$	150.00
8.	-		hildren's education costs		8.	\$	0.00
9.		•	ry, and dry cleaning		9.	·	0.00
			roducts and services		10.	·	55.00
11.			ntal expenses		11.	\$	0.00
12.		•	Include gas, maintenance, bus or train fare ar payments.).	12.	\$	94.00
13			ar payments. clubs, recreation, newspapers, magazine	es and hooks	13.	\$	0.00
			ributions and religious donations	os, and books	14.	\$	25.00
		rance.	indutions and rengious donations		17.	Ψ	23.00
			surance deducted from your pay or include	d in lines 4 or 20.			
		Life insura		-	15a.	\$	0.00
	15b.	Health ins	urance		15b.	\$	0.00
	15c.	Vehicle in	surance		15c.	\$	0.00
	15d.	Other insu	rance. Specify:		15d.	\$	0.00
16.	Taxe	s. Do not ir	clude taxes deducted from your pay or inclu	uded in lines 4 or 20.			
	Spec	•			16.	\$	0.00
17.			ease payments:		4-	•	
		, ,	ents for Vehicle 1		17a.	·	0.00
			ents for Vehicle 2		17b.	*	0.00
		Other. Sp			17c.	·	0.00
4.0		Other. Sp	·		17d.	\$	0.00
18.			of alimony, maintenance, and support the your pay on line 5, Schedule I, Your Inco		18.	\$	0.00
19.			s you make to support others who do not			\$	0.00
	Spec		уси пине не сиррен сине и по	,	19.	<u> </u>	0.00
20.			erty expenses not included in lines 4 or 5	of this form or on Sche		ur Income.	
			s on other property		20a.		0.00
	20b.	Real estat	e taxes		20b.	\$	0.00
	20c.	Property,	nomeowner's, or renter's insurance		20c.	\$	0.00
	20d.	Maintenar	ice, repair, and upkeep expenses		20d.	\$	0.00
	20e.	Homeown	er's association or condominium dues		20e.	\$	0.00
21.	Othe	r: Specify:			21.	+\$	0.00
22	Calci	ulate vour	monthly expenses				
		•	through 21.			\$	819.00
			2 (monthly expenses for Debtor 2), if any, fr	om Official Form 106J-2		\$	013.00
			a and 22b. The result is your monthly expe			\$	819.00
	220.7	Add IIIIe ZZ	a and 22b. The result is your monthly expen	11363.		Ψ	819.00
23.		-	monthly net income.				
			12 (your combined monthly income) from S	chedule I.	23a.	·	821.00
	23b.	Copy you	monthly expenses from line 22c above.		23b.	-\$	819.00
	06	0.1					
	23c.		our monthly expenses from your monthly in	come.	23c.	\$	2.00
		rne result	is your monthly net income.		200.		2.00
24.	For ex	xample, do yo ication to the	an increase or decrease in your expense ou expect to finish paying for your car loan within the terms of your mortgage?	,			ase or decrease because of a
			Evolain here:				

Official Form 106J Schedule J: Your Expenses 17-42907-mar Doc 10 Filed 03/16/17 Entered 03/16/17 09:04:48 Page 35 of 43

Debtor 1	Evelyn Marie Vau	ghn			
	First Name	Middle Name	Last Name		
Debtor 2					
Spouse if, filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:	EASTERN DISTRICT C	OF MICHIGAN		
ase number	17-42907-mar				
f known)				_	Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below							
Die	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	No							
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)				
tha	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Evelyn Marie Vaughn X							
	Evelyn Marie Vaughn Signature of Debtor 1		Signature of Debtor 2					
	Date March 2, 2017		Date					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

EU to 1	l in inform						
Fill in t	his infori	mation to identify you	r case:				
Debtor	1	Evelyn Marie Va	Middle Name		Last Name		
Debtor	2	First Name	Middle Name		Last Name		
(Spouse i		First Name	Middle Name		Last Name		
United	States Ba	inkruptcy Court for the:	EASTERN DISTRICT	OF MICE	HIGAN		
Case n	umber	17-42907-mar					
(if known)	_					_	Check if this is an amended filing
							amended ming
Offic	ial Fo	rm 107					
		-	Affairs for Indiv	/idua	Is Filing for B	ankruptcy	4/1
Be as c	omplete a	and accurate as poss	ible. If two married people	e are fili	ing together, both are	equally responsible for su	
		nore space is needed n). Answer every que	•	to this f	orm. On the top of an	y additional pages, write yo	ur name and case
Part 1:	_	,	arital Status and Where Y	ou Live	d Before		
				<u>54 2.75</u>	<u>u Bololo</u>		
ı. wı	•	r current marital stati	15:				
	Married						
-	Not ma	rried					
2. Du	ring the I	ast 3 years, have you	lived anywhere other tha	an where	e you live now?		
	No						
		st all of the places you	lived in the last 3 years. Do	not incl	ude where you live now	I.	
De	ebtor 1 P	rior Address:	Dates Debtor	1	Debtor 2 Prior Ac	Idress:	Dates Debtor 2
			lived there				lived there
		ion Lake Road Township, MI 48045	From-To: 5 10/2014-09/3	2016	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
110	arrison	Townsinp, iiii 4004	, 10/2011 00//	-0.0			110111110.
states a	nd territor No Yes. Ma	ries include Arizona, Ca	lifornia, Idaho, Louisiana, I hedule H: Your Codebtors	Nevada,	New Mexico, Puerto R	ity property state or territorico, Texas, Washington and V	
Part 2	Expla	in the Sources of You	r Income				
Fill	in the total	al amount of income yo	mployment or from opera ou received from all jobs an I have income that you rece	id all bus	sinesses, including part		endar years?
	No						
		II in the details.					
			Debtor 1			Debtor 2	
			Sources of income	G	oss income	Sources of income	Gross income
			Check all that apply.	(be	efore deductions and	Check all that apply.	(before deductions

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

and oth	er public benefit	ess of wheth payments;		terest; dividends; money collect at you received together, list it o	ted from lawsuits; royaltie	s; and gambling and lottery
List ead	ch source and the	e gross inco	ome from each source sepa	arately. Do not include income t	hat you listed in line 4.	
□ No ■ Ye	o es. Fill in the deta	ails.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until sthe date you filed for bankruptcy:			Social Security	\$1,642.00		
	lendar year: to December 3	1, 2016)	Social Security	\$9,852.00		
			FIA	\$1,746.00		
	endar year befo to December 3		Social Security	\$9,852.00		
			FIA	\$1,164.00		
	her Debtor 1's o	or Debtor 2' otor 1 nor D		or Bankruptcy ner debts? nsumer debts. Consumer debt	s are defined in 11 U.S.C.	§ 101(8) as "incurred by an
S. Are eiti	her Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1's co. During the 9 No. Yes * Subject to	or Debtor 2' otor 1 nor D rimarily for a 0 days befo Go to line 7 List below e paid that cre not include o adjustment	each creditor to whom you payments to an attorney for a new fire you filed for bankruptcy.	ner debts? nsumer debts. Consumer debts hold purpose." did you pay any creditor a total paid a total of \$6,425* or more inents for domestic support oblig or this bankruptcy case. ears after that for cases filed on	I of \$6,425* or more? In one or more payments a gations, such as child supp	and the total amount you port and alimony. Also, do
S. Are eiti	her Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1's co. During the 9 No. Yes * Subject to. Bess. Debtor 1 or During the 9	or Debtor 2' otor 1 nor D rimarily for a 0 days befo Go to line 7 List below e paid that cre not include o adjustment Debtor 2 o 0 days befo	est debts primarily consurted to the personal, family, or house the you filed for bankruptcy. The seach creditor to whom you peditor. Do not include paying payments to an attorney for a not 1/19 and every 3 year both have primarily cortice you filed for bankruptcy.	ner debts? nsumer debts. Consumer debts hold purpose." did you pay any creditor a total paid a total of \$6,425* or more inents for domestic support oblig or this bankruptcy case. ears after that for cases filed on	I of \$6,425* or more? In one or more payments a pations, such as child support or after the date of adjusting.	and the total amount you port and alimony. Also, do
S. Are eiti	her Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1 or During the 9 * Subject to During the 9 No. Yes	or Debtor 2' otor 1 nor D cimarily for a 00 days befo Go to line 7 List below e paid that cre not include o adjustment Debtor 2 o 00 days befo Go to line 7 List below e include pay	es debts primarily consur- pettor 2 has primarily cor- personal, family, or house are you filed for bankruptcy. each creditor to whom you editor. Do not include payn payments to an attorney for ton 4/01/19 and every 3 year both have primarily cor- are you filed for bankruptcy.	ner debts? nsumer debts. Consumer debts hold purpose." did you pay any creditor a total paid a total of \$6,425* or more intents for domestic support obligar this bankruptcy case. pears after that for cases filed on usumer debts.	I of \$6,425* or more? In one or more payments a pations, such as child support or after the date of adjusted of \$600 or more?	and the total amount you port and alimony. Also, do ment.
S. Are eiti	her Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1 or During the 9 * Subject to During the 9 No. Yes	or Debtor 2' otor 1 nor D rimarily for a 0 days befo Go to line 7 List below e paid that cre not include o adjustment Debtor 2 o 0 days befo Go to line 7 List below e include pay attorney for	es debts primarily consur- pettor 2 has primarily cor- personal, family, or house are you filed for bankruptcy. each creditor to whom you peditor. Do not include paying payments to an attorney for ton 4/01/19 and every 3 year both have primarily cor- per you filed for bankruptcy. each creditor to whom you pents for domestic support	ner debts? nsumer debts. Consumer debts hold purpose." did you pay any creditor a total paid a total of \$6,425* or more in this bankruptcy case. Pears after that for cases filed on the same debts. Indid you pay any creditor a total paid a total of \$600 or more and tobligations, such as child supplementations.	I of \$6,425* or more? In one or more payments a pations, such as child support or after the date of adjusts I of \$600 or more? If the total amount you paid port and alimony. Also, do	and the total amount you port and alimony. Also, do ment.
Credit Within Insiders of which	her Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1 or No. Yes * Subject to or During the 9 No. Yes No. Yes * Yes	or Debtor 2' otor 1 nor D cimarily for a 00 days befor 3 00 days befor 3 00 days befor 4 00 days befor 5 00 days befor 6 00 days befor 7 00 days befor 7 00 days befor 9 00 da	S debts primarily consurted to the personal of	ner debts? nsumer debts. Consumer debts hold purpose." did you pay any creditor a total paid a total of \$6,425* or more in the solution of th	I of \$6,425* or more? In one or more payments a pations, such as child support or after the date of adjusting of \$600 or more? If the total amount you paid port and alimony. Also, do the total amount you paid port and alimony. Was the still owe Wed anyone who was an orships of which you are a green securities; and any management of the securities.	and the total amount you port and alimony. Also, do ment. d that creditor. Do not not include payments to an this payment for in insider? general partner; corporation aging agent, including one for
Credit Within Insiders of which a busin alimony	her Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1's co. Neither Debtor 1 or No. Yes * Subject to or During the 9 No. Yes No. Yes * Yes	or Debtor 2' otor 1 nor D cimarily for a co days befor Go to line 7 List below e paid that cre not include p co adjustment co Debtor 2 o co days befor Go to line 7 List below e include payr attorney for Address ou filed for latives; any cer, director, as a sole pr	debts primarily consurted to the personal of t	ner debts? nsumer debts. Consumer debts hold purpose." did you pay any creditor a total paid a total of \$6,425* or more in the paid a total of \$6,425* or more in the paid a total of \$6,425* or more in the paid a total of \$6,425* or more in the paid a total of \$6,000 or more and total of \$600 or more of the you or of any general partners; partners of 20% or more of their voting or of 20% or more of their voting	I of \$6,425* or more? In one or more payments a pations, such as child support or after the date of adjusting of \$600 or more? If the total amount you paid port and alimony. Also, do the total amount you paid port and alimony. Was the still owe Wed anyone who was an orships of which you are a green securities; and any management of the securities.	and the total amount you port and alimony. Also, do ment. d that creditor. Do not not include payments to an this payment for in insider? general partner; corporations aging agent, including one fo

Case number (if known) 17-42907-mar

Official Form 107

Debtor 1 **Evelyn Marie Vaughn**

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1 Evelyn Marie Vaughn		Case number (if	known) 17-4290	7-mar
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost		ments or transfer any property	on account of	a debt that benefited an
	■ No □ Yes. List all payments to an insider				
	Insider's Name and Address	Dates of payment	Total amount Amount paid still o		for this payment reditor's name
Par	rt 4: Identify Legal Actions, Repossessio	ns, and Foreclosures			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.				
	□ No■ Yes. Fill in the details.				
	Case title Case number	Nature of the case	Court or agency	Status o	f the case
	Kelly Travis v Evelyn Marie Vaughn 15-08789H-SC	Travis v Evelyn Marie Vaughn Civil Suit 41-B District Court			
				Writ of	Garnishment
	Koala D. LLC v Evelyn Marie Vaughn 16-05991HLT,16-01025HLT,15-0979 4-H,15-00	Civil Suit	41-B District Court 22380 Starks Drive Clinton Township, MI 480	☐ Pend☐ On a☐ Cond	ppeal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo ■ No. Go to line 11. □ Yes. Fill in the information below.		rty repossessed, foreclosed, g	garnished, attac	hed, seized, or levied?
	Creditor Name and Address	Describe the Property Explain what happened		Date	Value of the property
11.		Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution accounts or refuse to make a payment because you owed a debt? No		tution, set off ar	ny amounts from your
	Creditor Name and Address	Describe the action the		Date action was taken	s Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		rty in the possession of an as	signee for the b	enefit of creditors, a
Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankrup ☐ No ☐ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value of more tha	n \$600 per pers	on?
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600	Describe the gifts		Dates you gave	Value
	per person Person to Whom You Gave the Gift and			the gifts	
Offici	Address: ial Form 107 State	ment of Financial Affairs for Ir	ndividuals Filing for Bankruptcy		page 3

Best Case Bankruptcy

Det	Evelyn Marie Vaugnn		Cas	ise number (<i>if kno</i> i	wn) 17-42907-	-mar
	Gifts with a total value of more than \$6 per person	00	Describe the gifts		ites you gave e gifts	Value
	Person to Whom You Gave the Gift and Address:	d				
	Great Lakes		\$25.00 monthly	me	onthly	\$25.00
	Person's relationship to you: none					
14.	Within 2 years before you filed for bank	ruptcy,	did you give any gifts or contributions	with a total valu	ue of more than	s \$600 to any charity?
	No No					
	Yes. Fill in the details for each gift or					
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed		ites you ntributed	Value
Par	t 6: List Certain Losses					
	or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred		ibe any insurance coverage for the lose the amount that insurance has paid. List	los	ate of your	Value of property lost
Par	t 7: List Certain Payments or Transfer		nce claims on line 33 of Schedule A/B: Pr	roperty.		
· a						
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	prepari	ing a bankruptcy petition?			erty to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propert transferred	or	ite payment transfer was ade	Amount of payment
	Frego & Associates - The Bankrup Law 23843 Joy Road Dearborn Heights, MI 48127 fregolaw@aol.com	otcy	Attorney Fees	10)/14/16	\$100.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that	editors o	or to make payments to your creditors?		nsfer any prope	erty to anyone who
	■ No					
	Yes. Fill in the details.		Description and the form	4		•
	Person Who Was Paid Address		Description and value of any propert transferred	or	ite payment transfer was ade	Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

18.	tran Incl	hin 2 years before you filed for bankrup nsferred in the ordinary course of your bude both outright transfers and transfers mude gifts and transfers that you have alread No	ousine nade as	ess or financial affa s security (such as	airs? the granting of a					
		Yes. Fill in the details.								
		rson Who Received Transfer dress		Description and v		p	escribe any property or ayments received or debts aid in exchange		Date transfer was nade	
	Pe	rson's relationship to you								
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trubeneficiary? (These are often called asset-protection devices.)						ettled trust or similar device	of \	which you are a		
	_	No								
		Yes. Fill in the details.								
	Na	me of trust		Description and v	alue of the pro	operty t	transferred	Date Transfer was made		
Par	t 8:	List of Certain Financial Accounts, In	strum	ents, Safe Deposi	t Boxes, and S	torage	Units			
20	Wit	hin 1 year before you filed for bankrupto	cv. we	re any financial ac	counts or inst	rument	ts held in your name, or for y	vour	benefit closed	
20.	solo Incl	d, moved, or transferred? lude checking, savings, money market, lses, pension funds, cooperatives, asso	or oth	er financial accou	nts; certificate	s of de	,		•	
		No	olatio	no, and outer ma	ioiai iiioiitatioi					
		Yes. Fill in the details.								
	Na		Last	t 4 digits of	Type of acco	ount or	Date account was		Last balance	
			ount number	instrument	ount of			before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
		No Yes. Fill in the details.								
	_	me of Financial Institution		Who else had acc	ees to it?	Desc	rihe the contents		Do you still	
		dress (Number, Street, City, State and ZIP Code)		Address (Number, State and ZIP Code)		Describe the contents			have it?	
22.	Hav	ve you stored property in a storage unit	or pla	ce other than you	home within	1 year b	pefore you filed for bankrup	cy?		
		No								
		Yes. Fill in the details.								
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)				Do you still have it?		
				State and zir Code)						
Par	t 9:	Identify Property You Hold or Control	I for S	omeone Else						
23.		you hold or control any property that so someone.	omeon	e else owns? Incl	ude any prope	rty you	borrowed from, are storing	for,	or hold in trust	
		No Yes. Fill in the details.								
	_	vner's Name Idress (Number, Street, City, State and ZIP Code)		Where is the prop (Number, Street, City, S Code)		Desc	ribe the property		Value	
				•						
Par		Give Details About Environmental Inf								

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

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Best Case Bankruptcy

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

(Number, Street, City, State and ZIP Code) Part 12: Sign Below

Name

Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

Date Issued

☐ Yes. Fill in the details below.

Debtor 1	Evelyn Marie Vaughn		Case number (if known)	17-42907-mar			
with a ban		king a false statement, concealing propup up to \$250,000, or imprisonment for up	3,	property by fraud in connection			
/s/ Evely	n Marie Vaughn						
,	Marie Vaughn of Debtor 1	Signature of Debtor 2					
Date Ma	arch 2, 2017	Date	Date				
Did you at ■ No □ Yes	tach additional pages to Your St	atement of Financial Affairs for Individe	uals Filing for Bankruptcy (Official Form 107)?			
Did you pa	ay or agree to pay someone who	is not an attorney to help you fill out ba	ankruptcy forms?				

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).